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Florida Department of State  
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To:  
Division of Corporations  
Fax Number : (850)205-0381

From:  
Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**FLORIDA PROFIT CORPORATION OR P.A.****TROPICAL FLOWERS INTERNATIONAL, INC.**

Certificate of Status	0
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**ARTICLES OF INCORPORATION**  
**OF**

**TROPICAL FLOWERS INTERNATIONAL, INC.**  
**5624 PLUNKETT STREET BAY # 2**  
**HOLLYWOOD FL 33023**

The undersigned incorporator(s) for the purpose of forming a corporation under the Florida General corporation act, hereby adopts(s) the following articles of incorporation.

**ARTICLE I NAME**

The name of this corporation shall be:

**TROPICAL FLOWERS INTERNATIONAL, INC.**

The principal place of business of this corporation shall be:

**5624 PLUNKETT STREET BAY # 2**  
**HOLLYWOOD FL 33023**

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK.**

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any on the time is: 500 Shares at ONE Dollars with a total of FIVE HUNDRED Dollars.

**ARTICLE IV TERM OF EXISTENCE.**

This corporation is to exist perpetually.

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**ARTICLE V OFFICERS DIRECTORS.**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporations existence or until their successor(s) is(are) elected, is(are):

**President:**

LIONEL T MOORE  
5624 PLUNKETT STREET BAY # 2  
HOLLYWOOD FL 33023

**ARTICLE VI INCORPORATION(S).**

The name(s) and street address(es) of the incorporator(s) to this article of incorporation is(are)

**President:**

LIONEL T MOORE  
5624 PLUNKETT STREET BAY # 2  
HOLLYWOOD FL 33023

In witness whereof, the undersigned incorporator(s) has(have) executed these article of incorporation this 27th day of JULY, 2001.

Signature(s) of Incorporator(s)



**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.325 Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida submits the following statement, in designating the registered office/ registered agent, in the State of Florida.

1. The name of the corporation is:

TROPICAL FLOWERS INTERNATIONAL, INC.

2. The name and address of the registered agent and office is:

LIONEL T MOORE

5624 PLUNKETT STREET BAY # 2

(P.O. BOX NOT ACCEPTABLE)

HOLLYWOOD FL 33023

(CITY/STATE/ZIP)

SIGNATURE

(Corporate Officer)

TITLE

President

DATE

07/27/2001

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE

(Registered Agent)

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